MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.		FILING DATE
APPLICANT(S)		10/524743

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
4		/					54						
5		/					55						
6		/					56						
7		/					57						
8		/					58						
9		/					59						
10		/					60						
11		/					61						
12		/					62						
13		/					63						
14		/					64						
15	/						65						
16		/					66						
17		/					67						
18	/						68						
19	/						69						
20		/					70						
21		/					71						
22		/					72						
23							73						
24		/					74						
25		/					75						
26		/					76						
27		/					77						
28		/					78						
29	/						79						
30		/					80						
31		/					81						
32	/						82						
33		/					83						
34	/						84						
35		/					85						
36		/					86						
37	/						87						
38		/					88						
39	/						89						
40		/					90						
41		/					91						
42		/					92						
43	/						93						
44		/					94						
45	/						95						
46		/					96						
47		/					97						
48		/					98						
49		/					99						
50							100						
TOTAL IND.	3	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	73	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	48						TOTAL CLAIMS						

PTO - 1360 (REV. 11/84)